ISDH Annual Fiscal Report of a Nonprofit Acute Care Hospital

Hospital: St. Vincent Randolph Hospital

Year: 2003 City: Winchester Peer Group: Small

Statement One: Summary of Revenue and Expenses

1. Gross Patient Service Revenue				
Inpatient Patient Service Revenue	\$6,955,173			
Outpatient Patient Service Revenue	\$23,124,744			
Total Gross Patient Service Revenue	\$30,169,917			
2. Deductions from Rev	venue			
Contractual Allowances	\$4,949,813			
Other Deductions	\$2,313,853			
Total Deductions	\$7,263,666			
3. Total Operating Rev	venue			
Net Patient Service Revenue	\$22,906,251			
Other Operating Revenue	\$1,070,344			

4. Operating Expenses					
Salaries and Wages	\$8,061,704				
Employee Benefits and Taxes	\$3,323,827				
Depreciation and Amortization	\$1,148,261				
Interest Expenses	\$838,513				
Bad Debt	\$1,514,307				
Other Expenses	\$7,221,805				
Total Operating Expenses	\$22,108,417				
5. Net Revenue and Expe	nses				
Net Operating Revenue over Expenses	\$1,868,178				
Net Non-operating Gains over Losses	\$141,526				
Total Net Gain over Loss	\$2,009,704				

Total Operating Revenue	\$23,976,595
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6. Assets and Liabilities					
Total Assets	\$32,261,820				
Total Liabilities	\$18,345,453				

Statement Two: Contractual Allowances						
Revenue Source	Gross Patient Revenue	Contractual Allowances	Net Patient Service Revenue			
Medicare	\$11,289,642	\$3,235,789	\$8,053,853			
Medicaid	\$4,404,215	\$1,714,024	\$2,690,191			
Other State	\$0	\$0	\$0			
Local Government	\$0	\$0	\$0			
Commercial Insurance	\$14,476,060	\$2,313,853	\$12,162,207			
Total	\$30,169,917	\$7,263,666	\$22,906,251			

Statement Three: Unique Specialized Hospital Funds						
Fund Category	Estimated Coutgoing Revenue from Others Estimated Outgoing Expenses to Others		Net Dollar Gain or Loss after Adjustment			
Donations	\$116,796	\$0	\$116,796			

Educational	\$0	\$0	\$0
Research	\$0	\$0	\$0

Number of individuals estimated by this hospital that are involve	ed in education
Number of Medical Professionals Trained In This Hospital	0
Number of Hospital Patients Educated In This Hospital	0
Number of Citizens Exposed to Health Education Message	27,000

Statement Four Annual Summarized Community Benefit Statement on Nonprofit Hospital

This hospital is a nonprofit organization and files an annual community benefit statement with the Department under Indiana Code 16-21-9. Each nonprofit hospital must confirm its mission statement, document the number of persons and dollars allocated under its adopted charity care policy, and describe the progress of the community to achieve specific objectives set by the hospital.

County	Randolph	Community	Randolph County
Location		Served	

Hospital Mission Statement

To improve the health status of the individuals and the communities we serve, with a special concern for the sick and poor.

Unique Services	Unique Services		Type of Initiatives		able
Medical Research	NO	Disease Detection	YES	Community Plan	YES

Professional Education	NO	Practitioner Education	NO	Annual Statement	YES
Community Education	NO	Clinic Support	YES	Needs Assessment	2001

Allocation of Dollars and Persons Served under Adopted Charity Policy

Most nonprofit hospitals adopt a charity benefit policy to serve the medically indigent. On an annual basis, the hospital will confirm the eligibility and set aside dollars to ensure low-income persons can be offered needed inpatient and outpatient hospital services.

	2001	2002	2003
Persons served in last twelve months	3,612	232,654	27,585
Charity Care Allocation	(\$831,033)	(\$471,863)	(\$854,142)

Hospital Community Benefit Projects and the Projects' Net Cost

On an annual basis, all nonprofit hospitals will report on the progress that the local community has made in reducing the incidence of disease and improving the delivery of health services in the community.

Name of Program and Description of	
Progress Made in Achieving Annual Objectives	Net Costs of Programs
No programs identified	\$0

Summary of Unreimbursed Costs of Charity Care, Government Funded Programs, and Community Benefits

Based on uniform definitions of costs, each nonprofit hospital must identify the costs of serving its community that are not reimbursed by government and other third party payers.

Specialized Programs	Unreimbursed Costs
1. Total unreimbursed costs of providing care to	(\$712,195)
patients	
unable to pay, to patients covered under government	
funded programs, and for medical education, training.	
2. Community Health Education	\$0
3. Community Programs and Services	\$0
4. Other Unreimbursed Costs	\$0
5. Total Costs of Providing Community Benefits	(\$712,195)

Identification of Additional Non-Hospital Charity Costs

In addition, some hospitals will have non-hospital organizations under its ISDH license are providing community benefits in this fiscal year.

Organization Providing Charity Care	Net Costs of Care
None	\$0

For further information on these initiatives, contact:

Hospital Representative: Marty Rugh

Telephone number: 317/338-7370

ISDH STATISTICAL COMPARISON BETWEEN THIS HOSPITAL AND OTHER HOSPITALS IN ITS PEER GROUP

PERFORMANCE INDICATOR	METHODOLOGY	THIS HOSPITAL'S RESULTS	PEER GROUP AVERAGE
1. # of FTE's	Number of Full Time Equivalents	237	238
2. % of Salary	Salary Expenses divided by Total Expenses	36.5%	40.6%
3. Average Daily Census	Patient Days divided by annual days (365 days)	7.7	14.6
4. Average Length of Stay	Number of Patient Days divided by the Number of Discharges	3.1	3.6
5. Price for Medical/Surgical per stay	Total Medical/Surgical charges divided by Medical/Surgical discharges	\$1,484	\$4,004
6. Gross Price per Discharge	Gross Inpatient Revenue divided by the Total Discharges	\$7,585	\$8,869
7. Outpatient Revenue Percentage	Outpatient Revenue divided by the Gross Total Revenue	76.6%	66.0%
8. Gross Price per Visit	Gross Outpatient Revenue divided by the Total Outpatient Visits	\$1,410	\$765

9. % of Medicare	Medicare Revenue divided by the Gross Patient Revenue	37.4%	40.5%
10. % of Bad Debt	Bad Debt Expense divided by the Gross Operating Expenses	6.8%	8.0%
11. Charity Allocation	Unreimbursed costs of providing services to patients under adopted charity policy	(\$712,195)	(\$270,368)
12. Net Margin	Excess of Revenue over Expenses divided by the Total Operating Revenue	7.8	3.2

Notes:

- 1. NR = Not Reported
- 2. See Statewide Results for definitions of terms.